



# WorldFest 2009 Volunteer Application

## Contact Information

Name	
Organization	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
Cell Phone	
E-Mail Address	

## Availability

During which hours are you available for volunteer assignments?

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Thursday morning   | <input type="checkbox"/> Friday morning   | <input type="checkbox"/> Saturday morning   |
| <input type="checkbox"/> Thursday afternoon | <input type="checkbox"/> Friday afternoon | <input type="checkbox"/> Saturday afternoon |
| <input type="checkbox"/> Thursday evening   | <input type="checkbox"/> Friday evening   | <input type="checkbox"/> Saturday evening   |

How many 4 hour shifts are you available to volunteer?

Thursday:                      Friday:                      Saturday:

## Interests

Tell us in which areas you are interested in volunteering

- ☐ Setup
- ☐ Check In Table
- ☐ Children's Activities
- ☐ Information Booth
- ☐ Parade of Cultures
- ☐ Sponsor Tent
- ☐ School Groups- Friday only
- ☐ Survey Taker

## Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

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### Previous Volunteer Experience

Summarize your previous volunteer experience.

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### Person to Notify in Case of Emergency

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
Cell Phone	
E-Mail Address	

### Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed)	
Signature	
Date	

### Parent or Guardian Signature

If under the age of 18 a parent or guardian must sign below.

Name (printed)	
Signature	
Date	

### Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.

**Louisville Metro Office for International Affairs**  
**400 South First Street**  
**Louisville, KY 40202**  
**502.574.4295**  
**Fax: 502.574.1477**  
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